A.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE (check onl 21b 27)	NUMBER: PAGE 29 / 29 y one) 22
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Full Name (Last, First, Middle Initial) Capuano For Congress Committee Mailing Address PO Box 440305		Transaction ID: 8154647 Date of Disbursement O 8
Somerville Purpose of Disbursement Candidate Name	State Zip Code MA 02144 011 Category/	Amount of Each Disbursement this Period 1000.00
Rep. Michael E. Capuano Office Sought: X House Disburser Senate President State: MA District: 08	Type ment For: 2010 Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)		1000.00
TOTAL This Period (last page this line number only)	—	21500.00